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FACSIMILE TRANSMITTALDATE: 03/21/2006
TO: Examiner Monica M. Pyo
U.S. Patent and Trademark Office
Group Art Unit: 2161
FACSIMILE NO.: 571-273-8300FROM: Samuel A. Kassatly
TELEPHONE NO.: (408) 323-5111
FACSIMILE NO.: (408) 521-0111
ATTY DOCKET NO.: SVL920030003US1
SUBJECT: Amendment ATitle: "System And Method For Efficiently Writing Data From An In-Memory Database To A
Disk Database"

Applicant(s): Kevin Brown, et al.

Attorney Docket No.: SVL920030003US1

Serial No.: 10/611,552

Filing Date: June 30, 2003

TOTAL NUMBER OF PAGES INCLUDING THIS COVER PAGE 19**THANK YOU FOR FORWARDING THIS DOCUMENT TO EXAMINER Monica M. Pyo**
AS SOON AS POSSIBLE.

Respectfully submitted,

Samuel A. Kassatly
Reg. No. 32,247
Date: 03/21/2006Enclosure: Amendment A**CERTIFICATE OF FAXING**I hereby certify that this correspondence is being faxed to the U.S. Patent and Trademark Office,
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Samuel A. Kassatly

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PTO/SB/21 (09-04)


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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/611,552	
	Filing Date	June 30, 2003	
	First Named Inventor	Kevin Brown, et al.	
	Art Unit	2161	
	Examiner Name	Monica M. Pyo	
Total Number of Pages in This Submission	19	Attorney Docket Number	SVL920030003US1

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) Facsimile cover page 2) Certificate of Transmission 3) Replacement Fig. 1 4) Affidavit of S. Elnaiffar
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Samuel A. Kassatly, Law Office		
Signature			
Printed name	Samuel A. Kassatly		
Date	03/21/2006	Reg. No.	32,247

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Samuel A. Kassatly	Date	03/21/2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/611,552
TOTAL AMOUNT OF PAYMENT (\$) 0		Filing Date	June 30, 2003
		First Named Inventor	Kevin Brown, et al.
		Examiner Name	Monica M. Pyo
		Art Unit	2161
		Attorney Docket No.	SVL920030003US1

METHOD OF PAYMENT (check all that apply)

☐ Check
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 Deposit Account Number: 09-0460
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For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims 29 - 20 or HP = 0 x 50 = 0
 HP = highest number of total claims paid for, if greater than 20.

Indep. Claims 3 - 3 or HP = 0 x 200 = 0
 HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
29	0	0	0	0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) 0

Other (e.g., late filing surcharge): 0

SUBMITTED BY		
Signature	Registration No. 32,247 (Attorney/Agent)	Telephone 408-323-5111
Name (Print/Type) Samuel A. Kassaly	Date 03/21/2006	

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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